REGISTRAR OF VOTERS TEMPORARY EMPLOYMENT APPLICATION

Types of work

- General Clerical (phones, data entry, filing)
- Review Forms
- Sort and Assemble mail pieces (involves lifting 15⁺lbs)
- Packaging of supplies and other warehouse tasks (involves some heavy lifting)
- Recruit poll workers
- Train poll workers

Pay

Hourly rates range from \$8.76-17.61, depending on knowledge and complexity of assignment

Location

Kearny Mesa office located at 5201 Ruffin Road, Suite I (on Southeast corner of Clairemont Mesa Boulevard and Ruffin Road between 163 and I-15



5201 Ruffin Rd, Ste I, San Diego, CA 92123-1620

P.O. Box 85656, San Diego, CA 92186-5656



Personnel (858) 495-5153 TDD (858) 694-3441 Mail-Stop O34

Temporary Employment Application

Political candidates or their relatives will not be employed with the Registrar of Voters. ◆
*****Must be at least 18 years of age*****

Social Security Card: Must be presented at time of employment.

Nar	ne:					Date:			
	(Last)	(First)	(MI)				
Ado	dress:(Nun	nber)	(Street)		(City)		(State)	(Zip)	
Pho				Email A				=	
	one:(Day	7)	(Evening)		ddress:				
 ◆ Are you a political candidate or related to a political candidate? ☐no ☐yes 									
• A	re you currently	employed by the C	ounty of San I	□no □yes; Department:					
• H	ave you ever bee	n employed by the	County of Sar	no lyes; Department:					
• Are you retired from the County of San Diego?					no yes; Department:				
• Are you a poll worker?					□no □yes				
• Which shifts can you work?					□days, □nights, and/or □weekends				
◆ Are you willing to work overtime? □daily □weekends									
• What type of work do you prefer?									
• How did you learn of this temporary employment opportunity?									
If required by position, do you have a valid California driver's license? no yes ,									
List any other job-related licenses/certificates that you may have:									
Have you ever been convicted of a Misdemeanor or Felony other than minor traffic violations? no yes If yes, please explain: Date: Disposition of case:									
EDUCATION/TRAINING : Include education/training that demonstrates your qualifications for the desired position(s). Start with the most recent. Verification may be required for positions with specific education/training requirements.									
	DATES	NAME AND LOG	CATION	TYPE OF	PROGRAM OR	COURSE	DIPLOMA/DI /CERT/UN		
1									
2									
3									

Experience may be paid or unpaid, full time or part time. Attach additional sheets if more space is needed. From: To: ____ Employer Name: __ City/State: Phone #: Job Title:_ Supervisor Name: Reason for leaving: Office Skills: Public Contact -- □ Person to Person, or □ Telephone \square Filing and Sorting \square Proofing \square Assembly \square Training Computer Skills: ☐ Word ☐ Excel ☐ Internet ☐ E-Mail ☐ Desktop Publishing Software ☐ Word Processing ☐ Hardware ☐ Software Typing WPM ☐ Mapping/Drafting/Surveying/GIS Work experience and other work skills: Phone #: _____ ___ To:____ Employer Name: ___ City/State: _____ Supervisor Name:____ Reason for leaving: Job Title:____ Office Skills: Public Contact -- □ Person to Person, or □ Telephone \square Filing and Sorting \square Proofing \square Assembly \square Computer Skills: ☐ Word ☐ Excel ☐ Internet ☐ E-Mail ☐ Desktop Publishing Software ☐ Word Processing ☐ Hardware ☐ Software Typing WPM ☐ Mapping/Drafting/Surveying/GIS Work experience and other work skills: From: Employer Name: To:____ Job Title: Supervisor Name:____ Reason for leaving: ___ Office Skills: Public Contact -- \square Person to Person, or \square Telephone \square Filing and Sorting \square Proofing \square Assembly \square Training Computer Skills: ☐ Word ☐ Desktop Publishing Software ☐ Excel ☐ Internet ☐ E-Mail ☐ Word Processing ☐ Hardware ☐ Software Typing WPM ☐ Mapping/Drafting/Surveying/GIS Work experience and other work skills: To:____ City/State: ____ From: Employer Name: _____ Phone #: Supervisor Name:___ Reason for leaving: Job Title: Office Skills: Public Contact -- □ Person to Person, or □ Telephone \square Filing and Sorting \square Proofing \square Assembly \square Training Computer Skills: ☐ Word ☐ Excel ☐ Internet ☐ E-Mail ☐ Desktop Publishing Software ☐ Word Processing ☐ Hardware ☐ Software Typing _____WPM ☐ Mapping/Drafting/Surveying/GIS Work experience and other work skills: City/State: To:_____ Employer Name: ____ Phone #: ____ ___ Supervisor Name:____ Reason for leaving: ___ Office Skills: Public Contact -- □ Person to Person, or □ Telephone ☐ Filing and Sorting ☐ Proofing \square Assembly \square Training Computer Skills: ☐ Word ☐ Excel ☐ Internet ☐ E-Mail ☐ Desktop Publishing Software ☐ Word Processing ☐ Hardware ☐ Software Typing _____WPM ☐ Mapping/Drafting/Surveying/GIS Work experience and other work skills: Consent to Release of Information: I consent to the release of information for use in determining my eligibility, qualifications and selection consideration about my work record, job performance, character, ability and fitness by employers, schools, law enforcement agencies and other individuals and organizations to authorized employees of the County of San Diego. I hereby release you, your organization, current or previous employers, or others from liability or damage that may result from furnishing the requested information. Certificate of Application: I certify that all statements and information provided in this application and any attachments are true, and I understand that any false or misleading statements or omissions of material facts may forfeit my right to employment considerations by the County of San Diego.

EXPERIENCE: Include all employment experience for the past ten years. Start with most recent and work back.

Your employment is contingent upon passing the required Background Check. If a 'Fail' decision is received you will not be considered for employment.

Signature:	Date:
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